TRAINED WORKERS PAY THEIR WAY

SKILLFUL investigation by trained workers has in the last three months saved the State one million dollars in the distribution of Unemployment Relief alone. This sensational economy is the achievement of the field staff and employes of the State Emergency Relief Board. The work of inexperienced employes and volunteers has been supplemented and made more effective by the supervision of experienced workers.

No family is discontinued or rejected without a conscientious investigation. Only when hidden resources or adequate incomes are discovered is relief refused. The trained worker is skilled in interviewing applicants. She helps them to understand the conditions under which relief is granted. This type of work has resulted in discontinuing relief to thousands of families who are not eligible. Board members who originally opposed taking on trained workers as an unnecessary expense are today the most enthusiastic over the results obtained in their counties by these employes.

As an example, the net savings of relief expenditures in one week in June in a sixth class county amounted to $5,565. During that month 452 families making application were put on the relief lists, while just twice as many —904 families—were rejected.

In another county 53 families were taken as a sample, and a study was made. The results are a measure of the value of training in interviewing and investigating applicants for relief.

> Investigation found 43 of the 53 families not eligible for relief. Of this number 32 had adequate incomes; nine had resources in property or insurance; two had relatives willing to assist. Of the thirty-two adequate incomes, eleven were over $20.00 a week; fifteen were working the entire time they were getting relief.

Returns from this work are to be measured not alone in dollars saved to taxpayers, but also in human values. The self-respect and independence of thousands of families is protected by removing the temptation to become parasites and derelicts and by preventing the abuse of state funds.

SAY IT WITH—34 FORMS

WHAT'S in a name? "And what's in a pile of printed forms?

Take the 350 odd kinds of blanks and forms formerly required for running the 10 state aided hospitals. Each hospital had its own particular shapes and colors and they were all different. Ordered in small quantities, they totalled a heavy printing bill.

It takes a good deal of effort to make changes because every institution is always convinced that it has a special and unique problem different from any other in the state or nation. But finally the Department convinced them that all their unique problems could be adequately covered by 34 standard forms. Printed in wholesale lots, there would be a very considerable saving for the state.

Thirty-four printed forms in a manila folder. They look unromantic enough. But pick up and examine them. Like Shakespeare's Seven Ages of Man those 34 forms run the gamut from puling infant to slippered pantaloon.

They begin diffidently with an obstretrical chart. The mother's record fills the page. Here on the bottom line the new arrival makes his official debut and the line reads: "Sex of child ..... Temp. ..... Weight ..... ths."

Next comes the Nursery record. By this time our hero figures on his own. The chart begins with a space for his name. Below are columns for his age—reckoned in days, his weight, bath, umbilicus, and other matters even more intimate.

Sometime after this he acquires the property sense. And we have a patient's clothes list, not unlike a laundry list, and a "Valuables envelope" of manila with lines for signatures of patient and witnesses across its face.

History sheets branch out into biography and summarize all the high spots of the patient's life; whooping cough, marriage, divorce, babies, all the joys and troubles of man's little world.

We hurry through a cluster of forms that bring to mind the sickly sweetness of ether, and the swish of crisp uniforms: Operative Notes; Fracture Record; Sputum, Smears, Exudates; Metabolism Chart, etc.

Finally here are two simple forms that finish the story abruptly: Post Mortem Notes and Permission for Autopsy.

Curtain.

Movement of Population of Children Under Care During the Year June 1, 1931 to May 31, 1933

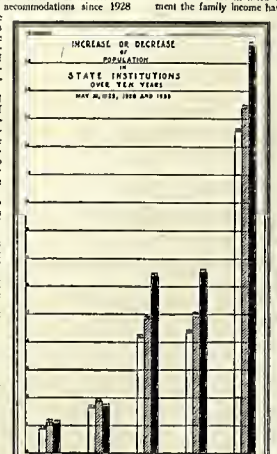
Type of Institution or Agency	Number of Organizations Reporting		Under Care At Beginning of Period		Received During the Year		Total for the Year		Discharged During the Year		Remaining End of Period	
	1933	1932	1931	1932	1931	1932	1931	1932	1931	1932	1931	1932
Institutions for Dependents	103	106	17,296	17,467	8,804	8,705	26,098	26,172	8,631	8,876	17,467	17,296
Institutions for Delinquents	29	29	6,251	6,254	2,479	2,457	8,730	8,711	2,476	2,460	6,254	6,251
Institutions for Physically Handicapped	10	8	652	672	172	176	824	848	152	196	672	652
Child Caring Agencies	71	68	11,207	10,750	5,958	7,301	17,165	18,051	5,958	6,844	11,207	11,207
Child Placing Agencies	46	54	7,230	7,178	2,448	2,912	9,678	10,090	2,411	2,860	7,267	7,230
Homes for the Aged	17	17	1,255	1,220	3,773	3,218	5,028	4,943	3,731	3,688	1,297	1,255
Homes for the Poor	11	11	998	977	559	615	1,557	1,592	621	594	936	998
Physical Hospitals	53	60	1,356	1,471	975	1,749	2,331	3,220	656	1,441	1,675	1,779
Total	430	453	46,195	46,189	25,167	27,783	69,396	73,584	25,630	28,713	48,766	46,871
									Duplications		7,586	1,361
									Total less Duplications		40,980	47,221

UPS AND DOWNS

WHILE stock market charts sank far below the horizon, population of state mental and penal institutions rose steadily in the last five years. The jump is the more spectacular in comparison with the previous half decade. As the years, 1928 to 1933, cover almost exactly the period of the depression, it is interesting to compare their effect on state institutions with the preceding period which included the peak of our prosperity.

The rise in the institutions for mental defectives, including epileptics, is explained by new buildings which have been opened to them since 1928 including the entire Selinsgrove Epileptic Colony and additional buildings at Pennhurst and Laurelton. Since mental defectives are born leaders of certain qualities, their numbers would not be affected by passing fluctuations, economic or otherwise.

On the other hand, it is quite possible that the rise in population of mental hospitals may be directly connected with the hardships and tension of the depression. New buildings do not account for this rise. Our mental hospitals have increased their accommodations since 1928 but barely enough to take care of the former dangerous overcrowding. Some of the buildings are for the intensive study and treatment of new patients, greatly increasing the efficiency of the institutions.



One factor in the rise of population is a by-product of the depression. Patients sufficiently improved to be discharged in normal times are now remaining in the hospitals. It is impossible to get jobs for them and their families are unable to care for them.

The July supplement to *Mental Hygiene* comments on the marked increase of population in the returns of state hospitals in various parts of the country ranging from 2 to 58 per cent. They had predicted such an increase a year ago. They find even more significant the rise in readmissions which show an increase of from 2 to 108 per cent.

In proportion to their size, penal populations increased most of all, the percentage increase for the decade being 27 per cent for mental hospitals and 53 per cent for penal institutions. This contrasts with the sharp drop taken in commitments for the last year, discussed on p. 4. The accompanying five year graph shows a general rise which accounts for the increase however.

It is interesting to find a reverse situation in the case of juvenile delinquents and the medical and surgical hospitals. Explanation of the hospital column's failure to rise depends on complicated factors. Many of these hospitals are in mining communities. Closed down mines furnish no accident cases. Similarly an out of work community, while it may face malnutrition, is not liable to industrial accidents. It is reported that increases in out-patient, dispensary and clinic populations also help to account for the falling off in hospital cases. People who would once have gone to bed now manage to keep up and go to the clinic instead.

The column for juvenile delinquents includes not only the state owned correctional school at Morganza, but also the state aided schools at Glen Mills and Sleighton Farms. These schools show a drop in population since 1928 which fairly corresponds to the rise of the previous five years. Various explanations of this drop in the juvenile delinquency rate—which is evident all over the country—are possible.

Thousands of mothers who were working to supplement the family income have been deprived of their jobs by the past years of unemployment. While this meant material hardship, it also strengthened the family unity and control over the children. Some commentators think that fathers, out of work and sitting around at home, had something to do with it. Young boys constitute a large majority of juvenile delinquents and fathers are traditionally more severe with wayward sons than mothers are wont to be.

A more prosaic explanation is that the counties, feeling the pinch of hard times, economize by being more lenient with delinquent boys, giving them warnings and putting them on probation instead of assuming the expense of sending them away to correctional schools. For it costs a county from $15 in the smaller institutions to $30 per month in the larger for every child committed.

Another possibility is the general sense of let-down due to hard times. Some think that the police are more lenient, being subject to human sympathies like the rest of us. In the old days, the railroad police relentlessly prosecuted boys caught riding on trains. Railroad property trespassers have increased so that in many cases town officials have warned officers that they will refuse to take any more of their complaints and arrests.

MONTHLY BULLETIN
PENNSYLVANIA·DEPARTMENT·OF·WELFARE
Vol. II, No. 4 HARRISBURG, PA. OCTOBER, 1933

VOTE FOR THE BOND ISSUE

By William A. Schnader, Attorney General

UNLESS Constitutional Amendment No. 8 is approved by the voters at the November election, a most serious situation will confront all State-aided hospitals, colleges and universities. In addition, substantial additional taxes will be necessary to raise money for unemployment relief.

Amendment No. 8 provides that the Governor, the Auditor General, and the State Treasurer may borrow $25,000,000 for the current expenses of the State during the current biennium. Of this sum $20,000,000 has been definitely appropriated by the Legislature for unemployment relief.

The remaining $5,000,000 will go to State-aided hospitals and State-aided colleges and universities.

The following educational institutions receive State aid; University of Pennsylvania, Pennsylvania State College, the University of Pittsburgh, Temple University, Jefferson Medical College, Hahnemann Medical College, and the Women's Medical College.

One-third of the appropriations made by the 1933 Legislature to these institutions was rendered contingent upon the passage of the bond issue. Therefore, if the bond issue fails, the appropriations to all of these institutions will be reduced exactly one-third.

The State-aided hospitals will receive $2,231,365 out of the bond issue if it is approved. Therefore, if it fails, our State-aided hospitals will be compelled to live during this two-year period on $2,231,365 less than if the bond issue passes. This is about twenty-five per cent of the appropriations to these hospitals.

If the $20,000,000 for relief is not provided by the bond issue, it will undoubtedly be necessary for an equal sum of money to be raised by new taxation.

All of the interests affected should realize the seriousness of the situation and should do everything in their power to aid in the passage of Amendment No. 8.

CHILDREN AND HARD TIMES

WHAT is happening to the children? Every summer the Department of Welfare takes a census of the nearly 50,000 children cared for away from their own homes in the state. They may be grouped in three classes, dependents, delinquents and defectives. They are cared for under supervision of child placing agencies in foster homes and in institutions. These organizations are supported by public and private funds.

This year's census shows some interesting contrasts to the previous year. As the number of families on relief increases, one might have expected that the number of children under care would also increase. On the contrary, it decreased slightly. One explanation is lack of funds for care of children.

The age distribution of children under care presents a changed picture. While the age groups under ten years old have remained stationary or diminished, indicating that fewer children are being accepted, the number of older children, especially of 16 years and over has notably increased. Children's workers say that this is due to the fact that it is no longer possible to make other plans for children at 16 as in normal times. Institutions can not find jobs for children; family connections are too hard pressed to come to the rescue; there is no place for the youngsters, and they are forced to stay on in the institutions.

Analysis of the trend in various types of children's institutions and agencies also shows significant changes. The total number of children in institutions has decreased while placing by child caring agencies has increased.

It is the desire and aim of the Department of Welfare that every child away from his own home in Pennsylvania shall have the care, protection and love which would have been his right in that own home, and the training and opportunity which will make of him a happy and useful citizen. To this end the Department tries to stimulate and encourage local programs for family and child welfare. The family is the first line of defense, and so a good family agency is the first requisite in a community. When the family has completely failed, there should be adequate resources for child care. Since children's situations are varied and therefore the needs of all cannot be met by anyone type of care, facilities should be varied in character. Above all, there should be someone in every community equipped to study the situation and necessities of the child, so that no one may be accepted for care unless it is necessary, and after acceptance, each child will be given the care which he particularly needs. In this way only will the public money which is spent on welfare be most economically spent, and the greatest public benefit accrue therefrom.

GETTYSBURG COLLEGE

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PENNSYLVANIA DEPARTMENT OF WELFARE

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ALICE F. LIVERIGHT ..... *Secretary of Welfare*
GERTRUDE MARVIN WILLIAMS ..... *Editor*
JOHN H. DAY ..... *Business Manager*

Vol. II, No. 6. October, 1933

All material herein is released to the press upon receipt

EDITORIAL

By Alice F. Liveright, Secretary of Welfare

N. R. A.!

Public works!

Re-employment!

THE New Deal—they are all "working." This is no time for skepticism and the results—jobs—construction—the full dinner pail—may not be universally evident, yet everyone believes that a wise program is now in operation.

Does this mean a cessation of unemployment relief? Does it mean that hospital budgets are out of the "red"?

That colleges are self-sustaining?

Certainly not!

The number of persons on relief in Pennsylvania is 622,000 below the high water mark of last May. But there will be thousands still requiring relief during the coming winter. The old story—the first to lose their jobs, will be the last taken back.

New cases are being taken on daily. Men and women who have made a long, game fight, their meager savings now exhausted. If they are not to suffer, more adequate budgets must be granted. The cost of living is increasing. Relief budgets even on a mere sustenance basis have to keep pace. Relief funds must continue to flow without interruption locally, state-wide and nation-wide.

If the bond issue fails, Pennsylvania will face a cessation of relief in the worst season of the year. There have been lapses in the past, but never in the winter and never with the temper of the people so sorely strained.

Hospitals are in a pitiful plight. Increasing demands for free care, and diminishing income from pay patients widen the gap between costs and income. Shall the sick be deprived of medical care? In a civilized State this is inconceivable.

Man lives not by food alone—we must offer to our youth the education that is their due. Without work—shall our young people also be deprived of the opportunity to occupy their time to their advantage and that of their communities?

You and all social minded citizens owe it to the unemployed, the sick and the youth seeking an education, to vote YES on *Proposed Amendment No. 6 to the Constitution!*

OUR CENTURY OF PROGRESS

By Clement W. Hunt, Deputy Secretary of Welfare

PENNSYLVANIA, like other States, did not recognize social welfare as a function of State government until the 60's. In 1869, the General Assembly created the Board of Public Charities and this agency represented the State's interest in public and private institutions until the Department of Welfare was established in 1921.

In the field of public welfare, Pennsylvania and even its individual counties today reflect the progress of a hundred years. We have the poor board system no longer considered as ideal as in earlier years. The private agency was born in the depression of 1873 when public support proved inadequate. In 1913 Pennsylvania established the Mothers' Assistance Fund with the objective of keeping children with their widowed mothers. The Pennsylvania system, while not the first established, has served as a model for many other States.

Today in every county of the Commonwealth along with the poor boards and private agencies, County Emergency Relief Boards administer unemployment aid under State supervision. Pennsylvania heads the list of States in the effectiveness of its distribution of Federal and State funds for unemployment relief.

As the shift in poor relief was from public to private aid in the 70's there is today every reason to believe that the end of this depression will find the poor boards and other public agencies of the counties responsible for the care of those in need merged in County Welfare Boards patterned after our most efficient Mothers' Assistance and Emergency Relief Boards.

A generation and more ago we placed our dependent children in asylums and almshouses where they were dwarfed physically, morally, and socially. We now emphasize the dependent or neglected child's right to be happily cared for first of all in his own home if possible or if not then under supervision in a carefully selected foster home or a private family boarding home.

The century has witnessed in Pennsylvania the passing of the lunatic asylum with its age old superstitions which encouraged abuse and neglect of the insane. In its place has come the mental hospital for the understanding care and scientific treatment of mental patients. The Keystone State was one of the first to establish a mental hospital in 1851 and it was the first in 1869 to establish an outpatient clinic for nervous diseases.

A decade ago Pennsylvania enlisted wholeheartedly in the new Mental Hygiene movement. The State is now unsurpassed in the program of community service carried on through 64 mental clinics conducted for the prevention of mental disease.

One hundred years ago Pennsylvania was attracting the attention of the whole civilized world with what was universally known as the Pennsylvania system of solitary confinement in vogue in the Eastern and Western Penitentiaries. The scheme was quickly adopted in many places and quite as promptly abandoned. Pennsylvania held so tenaciously to the system that little progress was made in the management of penitentiaries and county prisons until the last decade.

As in mental hygiene, so in prison welfare the State has come to recognize with other progressive States and Nations that merely locking up prisoners does not discourage but rather encourages crime. The aim today is to prevent crime. To this end we use probation wherever the nature of the crime and criminal warrants it, and attempt to restore to useful citizenship every prisoner capable of reformation.

MARRIAGE AND THE PSYCHOSES

IT is interesting to find that the 2,807 patients admitted to the state mental hospitals last year were almost evenly divided: 1,522 men and 1,285 women. The men were also evenly divided: 42 per cent single and 41 per cent married, the rest being widowed, divorced or separated. There may or may not be significance to the fact that of the women while, 30 per cent were single, half as many again—47 per cent were married!

Comparison of the ages of the married patients shows a curious reversal of the sexes around the age of 40. Of the 600 married women admitted, nearly half, 43 per cent were between 20 and 40 whereas married men of those ages amounted to only one quarter of their total number of 625. In the age group from 40 to 60 however, the situation is exactly reversed. Half of the married men are in this age group, and a little over a quarter—29 per cent—of the women.

Because women tend to marry earlier than men, there are more married women under 40 than there are men. In Pennsylvania this would only account for about 14 per cent of the difference however. One may not draw conclusions from figures for one year's admissions, but one may at least speculate as to the significance of this reversal. Is married life a greater strain on the woman under 40 and the man over 40 and if so why? It might be argued that the modern young woman finds herself in a very difficult transition period. The conflict between independence and domesticity burdens the younger group much more severely than it does the older.

There is less conflict for the young married man. The greatest strain for him seems to come after 40. The average man, especially in the white collar group probably stands up under a greater burden of strain, year in year out than do his women folk. His body begins to wear out after 40. In addition to a physical let-down, he realizes that youth has slipped away, that his best chances for doing what he wants with life are past. All he can look ahead to is a weary round of earning money to pay his family's bills. It is a difficult time.

LAST YEAR IN THE STATE MENTAL HOSPITALS

ALMOST all of us have friends or relatives in a mental hospital. Most of us know one or two people who, after staying for a few months or years, were cured and again able to take their place in society. Discoveries as the causes and processes of mental illness have freed it from the horror in which it was once held and we now regard it much as we should other illness.

Figures in regard to admissions and discharges from the state mental hospitals are now available for the last fiscal year, ending May 31, 1933. They show that dementia praecox was the commonest psychosis, accounting for 21 per cent of all cases. Although the manic depressives rank second in admissions, 417, they show a much higher number of discharges, with an exceptionally high proportion of women recovered and improved. The greater seriousness of dementia praecox is indicated by the fact that only 13 per cent of men and 16 per cent of women were classified as recovered, whereas of the manic depressives discharged, two thirds were considered cured. Epilepsy showed no recoveries but a high percentage of improvement.

Roughly, about the same proportions of men and women are discharged as recovered, improved and unimproved. The most notable differences occur in four groups. All involve conventional or ethical issues and all show a striking majority of men. The "without psychosis" group is largely composed of difficult people, behavior problems and cases verging on psychopathic personality. Most of them have conspicuously failed to adjust to the demands of modern social life. Of 200 cases in this group, 70 per cent are men.

Of the 252 cases of psychoses resulting from venereal infection, 72 per cent were men. In proportion to size, this group shows much the highest death rate. In the case of alcoholics, out of 112 admissions, 100 or 89 per cent were men. There were only 16 admissions of drug addicts, but of this group 69 per cent were men.

Psychoses of Patients Admitted to State Mental Hospitals—Year Ending May 31, 1933

Psychoses	Admissions: First			Admissions: Readmissions			Discharges: Recovered			Discharges: Improved			Discharges: Unimproved			Deaths		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
Dementia Praecox	276	311	587	79	51	127	13	12	27	66	78	144	22	19	41	126	96	222
Manic Depressive	218	229	447	58	56	114	108	152	252	43	77	120	9	9	18	11	10	21
General Paralysis and Cerebral Syphilis	134	72	206	8	7	15	8	8	16	45	21	66	4	1	5	102	23	125
Alcoholic	111	6	117	16	3	19	55	6	61	41	5	46	4	1	5	23	8	31
Drugs (Opium)	11	5	16	1	1	2	6	2	8	1	1	2	1	1	2	1	1	2
Without Psychosis	124	76	200	10	7	17	9	6	15	33	22	55	14	10	24	7	3	10
All other	308	286	1,011	54	37	91	72	69	141	142	156	298	18	11	29	294	236	530
Total	1,522	1,285	2,807	542	374	925	511	352	553	369	353	723	184	80	293	606	479	1,091

BETTER THAN AVERAGE

HIGHER criticism of penal statistics makes it increasingly difficult to say anything about them.

Some one is sure to remark—but you have no adequate data!

Crime waves as reported are sometimes emotion plus imagination. No method has been devised of getting an accurate picture of crime in any community. Criminal statistics are subject to leaks at a dozen points. No one can guess the number of offenses committed or the number of persons involved. Many crimes are never reported. Many accomplices escape. Efforts in other states to tabulate number of crimes reported to the police have not been successful; politics and other factors enter in.

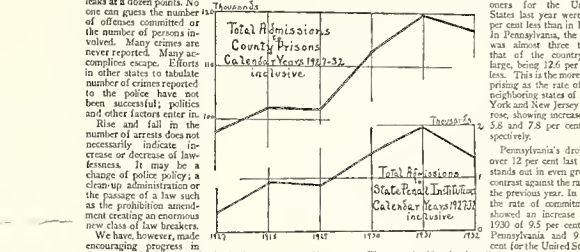
Rise and fall in the number of arrests does not necessarily indicate increase or decrease of lawlessness. It may be a change of police policy; a clean-up administration or the passage of a law such as the prohibition amendment creating enormous new class of law breakers.

We have, however, made encouraging progress in the matter of crime statistics in the last ten years. Since 1926 the Federal Government has taken an annual census of prisoners admitted to state and federal prisons and reformatories. While the figures for the individual states are subject to local influences, the trend of such a census for the country as a whole has significance.

Pennsylvania's situation is further complicated by the fact that offenders are sentenced indiscriminately to state or county prisons for the same crimes. Records kept by the county prisons do not distinguish between petty misdemeanors and serious offenses. Committals to state institutions do not present a fair picture of the number of offenders convicted and sentenced in this state with reservations.

Assuming that in the main the proportion of prisoners sentenced to state and county institutions remains about the same, the trend of commitments from year to year in either group of institutions does have significance.

Pennsylvania's commitments to state penal institutions showed a very satisfactory decrease in 1932 according to recent figures from the Department of Commerce, the more so when compared with neighboring states.



Commitments of prisoners for the United States last year were 4.5 per cent less than in 1931. In Pennsylvania, the drop was almost three times that of the country at large, being 12.6 per cent. This is the more surprising as the rate of the neighboring states of New York and New Jersey both rose, showing increases of 5.8 and 7.8 per cent respectively.

Pennsylvania's drop of over 12 per cent last year stands out in even greater contrast against the rate of the previous year. In 1931 the rate of commitments showed an increase over 1930 of 9.5 per cent for Pennsylvania and 9 per cent for the United States.

The second table, showing discharges of prisoners last year, also puts Pennsylvania in a favorable light in the high proportion of paroles granted. Both for its effect on the morale of the man, and as an economy measure for the state, progressive criminologists believe that the wise use of parole is valuable. In the United States, the percentage of all discharges released on parole was slightly over half, in this State the proportion was two-thirds. Similarly, the proportion of men serving until the expiration of their sentence was 30 per cent for the United States and only 7 per cent in this State.

In order to protect men from undue temptation and strain it is the policy not to release them on parole unless there is a job waiting for them, or they have funds to last 60 days while they look for work.

Movement of Population in State Institutions by groups—June 1, 1932 to May 31, 1933

	Mental Hospitals (including Diseases)			Mental Defectives (including Epileptics)			Juvenile Correctional			Adult Penal			Mental well-Surgical Hospitals	
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Total	
Total number in institutions, June 1, 1932	7,471	6,615	14,086	2,250	2,120	4,370	1,139	713	1,852	6,013	161	6,174	940	
Total on leave, June 1, 1932	439	750	1,189	129	350	479	1,267	580	1,847	2,042	72	2,114	.....	
TOTAL ON REGISTER, JUNE 1, 1932	8,141	7,365	15,275	2,454	2,470	4,849	2,406	1,293	3,699	8,055	233	8,288	940	
Total Admitted, June 1, 1932 to May 31, 1933	1,388	1,597	2,985	220	223	443	745	220	965	3,144	93	3,237	29,107	
Total Discharged, June 1, 1932 to May 31, 1933	1,440	1,186	2,626	177	154	331	1,062	344	1,406	3,239	79	3,318	29,247	
Total Remaining in Institutions, May 31, 1933	7,589	7,776	15,365	2,497	2,539	5,036	2,089	1,169	3,258	7,960	247	8,207	800	
Total on Parole, May 31, 1933	552	805	1,357	309	189	498	1,450	586	2,036	2,151	52	2,203	.....	
TOTAL ON REGISTER, MAY 31, 1933	8,141	7,367	15,508	2,806	2,728	5,534	3,539	1,755	5,294	10,111	299	10,410	1,000	

* Total number of out-patients treated during year.